## ISSUE SLIP STAPI & AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	מנהלמו		04-30-01
O.I.P.E. CLASSIFIER		. /. –	1/20
FORMALITY REVIEW	<b>a</b>	1128	18.16.01
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

Rejected	N
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